

## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)  
314-300710US

In re Application of Julie K. Andersen, et al.

Application Number: 10/618,444 Filed: July 11, 2003

For IRON SEQUESTRATION OR ELIMINATION TO REDUCE  
NEURODEGENERATION OR PARKINSONS DISEASE  
PROGRESSION

Group Art Unit 1649 Examiner Daniel K. Kolker

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above-identified application.

The requested extension and appropriate non-small-entity fee are as follows  
(check time period desired):

- |                                     |  |        |
|-------------------------------------|--|--------|
| <input type="checkbox"/>            | One month (37 CFR 1.17(a)(1))  | \$120  |
| <input type="checkbox"/>            | Two months (37 CFR 1.17(a)(2))   | \$450  |
| <input checked="" type="checkbox"/> | Three months (37 CFR 1.17(a)(3))   | \$1020 |
| <input type="checkbox"/>            | Four months (37 CFR 1.17(a)(4))  | \$1590 |
| <input type="checkbox"/>            | Five months (37 CFR 1.17(a)(5))  | \$2160 |
| <input checked="" type="checkbox"/> | Applicant is a small entity under 37 CFR 1.9 and 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ <u>510.00</u> . |        |

A small entity statement under 37 CFR 1.27:

- is enclosed.  
 has already been filed in this application.

- A check in the amount of the fee is enclosed.  
 The Commissioner has already been authorized to charge fees in this application to a Deposit Account.  
 The Commissioner is hereby authorized to charge any fees that may be required, or credit any overpayment, to Deposit Account Number 50-0893. I have enclosed a duplicate copy of this sheet.
- I am the  assignee of record of the entire interest.  
 applicant.  
 attorney or agent of record.  
 attorney or agent under 37 CFR 1.34(a)  
Registration number if acting under 37 CFR 1.34(a). \_\_\_\_\_

July 5, 2006  
Date

Signature

Tom Hunter, 38,498

Typed or printed name and Reg. No.

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, DC 20231 on the date below:

Typed or Printed Name	Chianti Appling	Date	7/5/06
Signature			

07/11/2006 SSESHE1 00000035 500893 10618444  
01 FC:2253 510.00 DA